

61
Appl. No. 09/428,836
Amdt. Dated November 8, 2004
Reply to Office Action of August 18, 2004

Attorney Docket No. 81800.0011
Customer No. 26021

AF
2622

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Yoshifumi TANIMOTO

Serial No.: 09/428,836

Confirmation No.: 5195

Filed: October 28, 1999

For: NETWORK PRINTING
APPARATUS



Art Unit: 2622

Examiner: Twyler Marie Lamb

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

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November 8, 2004

Date of Deposit

Joyce Hegeman

Name

Signature

November 8, 2004

Date

AMENDMENT UNDER 37 CFR §1.116

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the final Office Action dated August 18, 2004, please amend this application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

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Technology Center 2600

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Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted in the above-identified application is the following items.

- ☒ Amendment
☒ Return postcard

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	12	-20	20 **	0	LG=\$18 SM=\$9	\$18	\$ 0
INDEPENDENT CLAIMS FEE	3	-3	4 ***	0	LG=\$88 SM=\$44	\$86	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$290 SMALL ENTITY FEE = \$145		\$ 0
Independent Claims: 4, 8, 15					TOTAL		\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$ 0 to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$ to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

Date: November 8, 2004

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By:

Troy M. Schmelzer
 Registration No. 36,667
 Attorney for Applicant(s)

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